

Case 4:22-cv-00825-P Document 9 Filed 09/19/22 Page 23 of 24 PageID 745  
AO 440 (Rev. 12/09) Summons in a Civil Action

UNITED STATES DISTRICT COURT

for the  
Northern District of Texas

Jackson et al

*Plaintiff*

v.

Mayorkas et al

*Defendant*

Civil Action No. 4:22-cv-00825-P

**Summons in a Civil Action**

**TO:** Brian Penoyer, Assistant Commandant for Human Resources of the Coast Guard

(These copies of the summons and complaint are to be sent by registered or certified mail to the Attorney General of the United States at 950 Pennsylvania Avenue, NW, Washington, DC 20530-0001.)

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) -- or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12(a)(2) or (3) -- you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

Charles Fillmore  
201 Main Street  
Suite 801  
Fort Worth, TX 76102

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

CLERK OF COURT



Signature of Clerk or Deputy Clerk



DATE: 09/19/2022

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Civil Action No. 4:22-cv-00825-P

**PROOF OF SERVICE**

*(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))*

This summons for (name of individual and title, if any) \_\_\_\_\_  
was received by me on (date) \_\_\_\_\_.

☐ I personally served the summons on the individual at (place) \_\_\_\_\_  
\_\_\_\_\_ on (date) \_\_\_\_\_; or

☐ I left the summons at the individual's residence or usual place of abode with (name) \_\_\_\_\_  
\_\_\_\_\_, a person of suitable age and discretion who resides there,  
on (date) \_\_\_\_\_, and mailed a copy to the individual's last known address; or

☐ I served the summons on (name of individual) \_\_\_\_\_, who is designated  
by law to accept service of process on behalf of (name of organization) \_\_\_\_\_  
\_\_\_\_\_ on (date) \_\_\_\_\_; or

☐ I returned the summons unexecuted because \_\_\_\_\_; or

☒ other (specify) I served the Attorney General via certified mail pursuant  
to FRCP 4(i).

My fees are \$ \_\_\_\_\_ for travel and \$ \_\_\_\_\_ for services, for a total of \$ \_\_\_\_\_

I declare under penalty of perjury that this information is true.

Date: 11/1/2022

  
\_\_\_\_\_  
Server's signature

Mary Shembro  
\_\_\_\_\_  
Printed name and title  
112 S. Hanley Rd., Ste 200  
St. Louis, Mo 63105  
\_\_\_\_\_  
Server's address

Additional information regarding attempted service, etc:



SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> <li>■ Complete items 1, 2, and 3.</li> <li>■ Print your name and address on the reverse so that we can return the card to you.</li> <li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>		A. Signature <b>X</b> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee	
1. Article Addressed to: <div style="border: 1px solid black; padding: 5px; margin: 5px;"> Attorney General  of the United States  950 Pennsylvania Avenue, NW  Washington, DC 20530-0001 </div>		B. Received by (Printed Name)	C. Date of Delivery
2. Article Number (Transfer from service label) <div style="border: 1px solid black; padding: 5px; margin: 5px;"> 7021 0350 0001 3147 9700 </div>		D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
3. Service Type <input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery		<input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery	
PS Form 3811, July 2020 PSN 7530-02-000-9053		MCH-Peroyer Domestic Return Receipt	

USPS TRACKING #	
<div style="border: 1px solid black; padding: 5px; margin: 5px;"> 9590 9402 7268 1284 5995 55 </div>	
United States Postal Service	
<div style="border: 1px solid black; padding: 5px; margin: 5px;"> First-Class Mail  Postage &amp; Fees Paid  USPS  Permit No. G-10 </div>	
<div style="border: 1px solid black; padding: 5px; margin: 5px;"> • Sender: Please print your name, address, and ZIP+4® in this box• </div>	
<div style="border: 1px solid black; padding: 5px; margin: 5px;"> Mary Catherine Hodes  Thomas More Society  112 South Hanley Road, Suite 200  St. Louis, MO 63105 </div>	

Tracking Number:

**70210350000131479700**



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**Delivered, Individual Picked Up at Postal Facility**

WASHINGTON, DC 20530

September 26, 2022, 4:52 am

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